OFFICE OF RECULATION	228789
STATE OF SOUTH CAROLINA	BEFORE THE
(Caption of Case)	PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA
Example: Application for a Class C Charter Certificate from 2 5 201	-
Matthew Pruitt	TRANSPORTATION COVER SHEET
Pruitt's Services, LLC COPY)	DOCKET OOU 100
Posted: Lock	NUMBER: 2011 - 127 - 7
	If this is your first time filing an application with the PSC, you will not
Dept: A.H.	have a Docket Number. The Commission will assign one to you. If you have filed with the Commission before, a Docket Number was assigned
Date: 3/24/N	and should be entexed above.
(Please type or print) Submitted by: Matthew Paintine: 1:20	Telephone: 864-617-8883
Address: 120 McCullough Dr.	Fax:
Iva 5C 29655	0.1
	Email: pruitt m@vmcmail.com
NOTE: The cover sheet and information contained herein neither replace	es nor supplements the filing and service of pleadings or other papers
as required by law. This form is required for use by the Public Service be filled out completely.	Commission of South Carolina for the purpose of docketing and must
NATURE OF ACTION	(Check all that apply)
Application - Class A/A Restricted	Request for Name Change on Certificate
Application - Class C Taxi	Request to Amend Scope of Authority
Application - Class C Charter	Request to Amend Tariff (rate increase, etc.)
Application - Class C Charter Bus	Request to Amend Passenger Limit
Application - Class C Non-Emergency	VEID Request
☐ Application - Class C Charter Bus ☐ Application - Class C Non-Emergency ☐ Application - Class C Stretcher Van MAR 2 4	Exhibit
Application - Class E Household Goods	Late-Filed Exhibit
Application - Class E Household Goods CLERK'S OFF	CE Letter
Application	Proposed Order
Request for Extension to Comply with Order	Publisher's Affidavit
Request for Order Granting Authority to Obtain a Certificate	Reservation Letter
of Public Convenience and Necessity to be Rescinded	Response
Request for Cancellation of Certificate	Return to Petition
Request for Suspension	Other:
Request for Reinstatement	· ·
_	
If you have any questions about this form, please contact th	e PUBLIC SERVICE COMMISSION at 803-896-5100.

PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA

101 Executive Center Drive, Suite 100 Columbia, South Carolina 29210

(Mailing address: Post Office Drawer 11649, Columbia, SC 29211)

Phone: (803) 896-5100

Fax: (803) 896-5199

APPLICATION FOR CERTIFICATE OF PUBLIC CONVENIENCE AND NECESSITY FOR OPERATION OF MOTOR VEHICLE CARRIER

	Date: 3/16/11
CLA	ASS C - CHARTER
Appl of S.	ication is hereby made for a Certificate of Public Convenience and Necessity, in accordance with the provision C. Code Ann., § 58-23-10, et seq. (1976), and amendments thereto.
l. N	ame under which business is to be conducted (corporation, partnership, or sole proprietorship, with or without trade name.
•	Pruitt's Services, LLC
-	120 McCullough Dr. Iva SC 29655 Street Address of Applicant
	Mailing Address of Applicant if different from street address
	764-617-8883 Phone Fax
	Phone Pruittm@vmcmail.com Email Address
_	Email Address
2. I	f incorporated, a copy of Articles of Incorporation must be attached. (If incorporated outside of SC, attach SC Secretary of State "Foreign Corporation" Certificate.)
3. \$	Select Entity Type: (Check one)
	☑ Individual Owner/Sole Proprietorship □ Partnership - List names and address of all person having an interest in the business.
	Corporation - List names and addresses of two principal officers.
	Corporation Distriction in American Ame

1 1 111

Applicant is financially able to furnish the services as specified in this application and submits the following statement of assets and liabilities.

BALANCE SHEET

	Month March Year 2011
Assets:	
Cash	#1500°°
Receivables	
Real Estate	
Buildings and Equipment (Net)	
Motor Vehicles (Net)	#8000°2
Garage Equipment (Net)	
Machinery and Tools (Net)	
Supplies on Hand	
Prepaids and Other Assets	
Total Assets	#9500°°
Liabilities and Equity:	·
Accounts Payable	
Notes Payable	
Mortgages Payable	
Equipment Obligations	•
Accrued Salaries and Wages	
Other Accrued Obligations	
Other Liabilities	
Total Liabilities	-0-
Capital Stock	
Retained Earnings	
Total Equity	

Total Liabilities and Equity

PROPOSED RATES AND CHARGES FOR SERVICE

	HO CHAIRES TOL GOL	VICE ALC AS JUITOWS.	la acete	
ximum Proposed Rates a	Not to ex	ed \$ 10. per	nour	
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Counties to be Served: A	nderson, Abbevi	ille Pickens, Gre	cenwood, Greenville	!
Counties to be Served:	nderson, Abbevi	ille, Pickens, Gre	cenwood, Greenville	•
			conwood, Greenville	
	nderson, Abbevi			
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DESCRIPTION OF EQUIPMENT

MAKE	YEAR & M	ODEL	VIN#	WEIGHT EMPTY	SEATING CAPACITY
Cadillac		Fleetwood		712151 7200 lbs	7
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INSUBANCE OFFICE The form MUST BE COMPLETED AND SHE VET BY ALL AT THORIZED MISTERNOE COMPANY REPRESENTATIVE The insurance quote usuar be complete, listing convent insurance quentions, at the distriction of the Commission, a copy of convent. insurance to price and percentaged. Include the August Copy of insurance includes an issue requested: The following incurance queste is for: Proits Services , LCC Name of Women dece 120 Mccullough Drive IVA 5C Address of Moltic Catalon Amount of Breminne Limits Quoted: (See Relays) Links 25/50/25 Liability insurance \$ __1065.00 The above aposed pression is ford form of 12 mouths. Minimum Limits - Incresses Only \$25,000/80,000/25,000 All Passengers B-150Phisongors 3 25,000/100:000/25.000 Name of Institute Company One Geico Blyd Freenchsturg > Lam Apolites With the Commissions River and Augustinas relating to the recommendation the allowed the neous the minimum manages. That is prescribed. The insurance company making this quote is authorized by the South Carolina Department of Insurance to the pasiness of South Carolina. 3/14/11/ Date: Authorizea Insurance Comno Anthony Sarwood

NOTICE

If you wish to self-insure your mount whiches for Inbilling and property of 766-509 9444

Ann. Sections 56-9-60 and 58-23-910. For more infirmment, common the Vice National Sarwood Ex+ 4049 Vehicles 11(203) 896-8437 If you wish in aprile as a self-insured for workers compensation coverage. the South Euralian Worker's Lompensation Commission (WCC) provided bond or fones-of-ciedle with 1808 PCCC need minimized an Scockfull. It soil If anter to pay an amual assessment to the Court Carolina Second Injury WCC Self-insurance Division at (\$03) 737-5712 or on the webset which

Exhibit FWA

_	Name of Applicant
	14dillo Ol 12ppilonia
1.	Are there currently any outstanding judgments against the Applicant? O Yes No
	If Yes, indicate nature of judgement(s) against applicant.
	·
2.	Is Applicant familiar with all statutes and regulations, including safety regulations and governing for-hire motor carrier operations in South South Carolina, and does Applicant agree to operate in compliance with these statutes and regulations?
	Yes O No
	·
3.	Is Applicant aware of the Commission's insurance requirements and the insurance premium costs associated
	therewith? Yes O No

t and

Exhibit on Driver Qualifications

1.	Applicant understands that all drivers must be a minimum of 18 years of age.				
	Yes	0 1			
2.	Applicant unders and such record t be maintained in	from the DMV o	he state in which the driver is o	year driving record issued by the SC DMV r has been domiciled for such period must	
	Yes	0 1	0		
3.	Applicant unders	stands that a crim	nal history background check fr nt's business office.	om the state where the driver currently lives	
		0]	0		
4.	Applicant understheir possession state of residence	when operating a	ers operating a vehicle under a c charter vehicle, a valid driver's l	Class C Charter Certificate must have in icense issued by the SC DMV or the current	
	Yes	0 :	o .		
5,	vehicles to drive	ers who are regist	ss C Charter Certificate holders ed, or required to be registered r any national registry of sex of	are prohibited from employing or leasing as sex offenders with the South Carolina fenders.	
	W Yes	0	Йo		

PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA POST OFFICE DRAWER 11649 COLUMBIA, SOUTH CAROLINA 29211

Applicant is familiar with the provision of S.C. Code Ann. §58-23-10, et seq.(1976), and amendments thereto, and R.103-100 through R.103-241 of the Commission's Rules and Regulations for Motor Carriers (Vol.26, S.C. Code Ann., 1976), and R.38-400 through 38-503 of the Department of Public Safety's Rules and Regulations for Motor Carriers (Vol.23A, S.C. Code Ann., 1976) and amendments thereto, and hereby promises compliance therewith.

STATE OF SOU	uth carolina Indesso)	//	Tothe Frank	
COUNTYOR	711.000		<u></u>	Applicant's Signature	
	Madday	Duith		Diner	
I,	Name of Applic	Puithant's Representative	,	Title	
of	Aui	H's Services	46		
	11001		Applicant	<u>, </u>	,
the Applican affirm that al	t for the Certifica I statements cont	te of Public Convenie ained in the above app	nce and Necessi lication are true	ty as set forth in the forego and correct.	oing, swear or
				,	
				Mathew true	gf
			Signa	ature of Applicant's Repres	sentative

Commission Expires MY COMMISSION EXPIRES JULY 24, 2011

The State of South Carolina



Office of Secretary of State Mark Hammond

Certificate of Existence

I, Mark Hammond, Secretary of State of South Carolina Hereby certify that:

PRUITT'S SERVICES, LLC, A Limited Liability Company duly organized under the laws of the State of South Carolina on March 11th, 2011, with a duration that is at will, has as of this date filed all reports due this office, including its most recent annual report as required by section 33-44-211, paid all fees, taxes and penalties owed to the Secretary of State, that the Secretary of State has not mailed notice to the company that it is subject to being dissolved by administrative action pursuant to section 33-44-809 of the South Carolina Code, and that the company has not filed a certificate of cancellation as of the date hereof.

Given under my Hand and the Great Seal of the State of South Carolina this 11th day of March, 2011

Mark Hammond

Mark Hammond, Secretary of State